

Utah's Division of Child and Family Services

Western Region Report

Qualitative Case Review Findings

Review Conducted

March 24-27, 2014

A Report by

The Office of Services Review, Department of Human Services

I. Introduction

The Western Region Qualitative Case Review (QCR) for FY2014 was held the week of March 24-27, 2014. Reviewers were selected from the Office of Services Review, the Division of Child and Family Services, community partners, and two child welfare experts from Alabama who participated as community volunteers. Reviewers also included individuals from the following organizations:

- Los Angeles County Department of Mental Health
- Marriage Law Foundation
- Family Support Center

There were 25 cases randomly selected for the Western Region review. The case sample included 20 foster care cases and five in-home cases. Cases were selected from the American Fork, Fillmore, Heber, Orem, Provo, Spanish Fork, and Wasatch Mental Health offices. A certified lead reviewer and shadow reviewer were assigned to each case. Information was obtained through in-depth interviews with the child (if old enough to participate), his or her parents or other guardians, foster parents (if child was placed in foster care), caseworker, teacher, therapist, other service providers, and others having a significant role in the child's life. Additionally, the child's file, including prior CPS investigations and other available records, was reviewed.

Staff from the Office of Services Review met with region staff on June 12, 2014 in an exit conference to review the results of the region's QCR. Scores and data analysis were reviewed with the region.

II. Stakeholder Observations

The results of the QCR should be considered within a broad context of local and regional interaction with community partners. Each year Office of Services Review staff members interview key community stakeholders such as foster parents, providers, representatives from the legal community, other community agencies, and DCFS staff. On March 19, 2014 OSR staff interviewed individuals and groups of DCFS staff and community partners. DCFS employees who were interviewed included the Regional Director, region administrators, supervisors, and caseworkers. Community partners interviewed included guardians ad litem, an assistant attorney general, foster parents, Utah Foster Care Foundation, and substance abuse providers. Strengths and opportunities for improvement were identified by the various groups of stakeholders as described below.

ASSISTANT ATTORNEY GENERAL AND GUARDIANS AD LITEM

Strengths

For the most part, the Assistant Attorney General (AG) gets what is needed from workers and there's lots of flow of information.

There is a quarterly meeting between the AGs and DCFS where issues and concerns are brought up.

Wasatch Mental Health (WMH) just started the ASPIRE program for teenage girls. This is a new population that wasn't being addressed.

There are no issues around establishing permanency goals in a timely manner. They are set at either the adjudication or the dispositional hearing. Concurrent goals are always established at the same time primary permanency goals are established.

DCFS hasn't been shy about asking for early termination of reunification services if the parent isn't doing anything to improve their circumstances.

DCFS has been focusing on assuring the goal of Individualized Permanency is only used when it's appropriate to do so. If the Individualized Permanency goal is selected, compelling reasons for the goal are well documented.

The AG-DCFS relationship in Western region is unparalleled. This culture was established a long time ago. It's come from the top down. The DCFS Regional Director and AG Section Chief have made it a priority to maintain a good relationship.

There is a strong team approach among all the legal partners in Fourth District, including the defense attorneys. For the most part there's a free flow of information.

Families are more likely to reunify if they participate in Drug Court. It's a successful program, but it gets less and less funding.

Peer parenting has done a lot better and improved. The Resource Family Consultants have been a good resource for foster parents.

They're working on a pilot project called Family Bridge. It's to help kids in residential treatment extend their informal team members so they can more quickly return home and have support people in place. It extends the family team to help sustain kids when they return home. The informal supports are informed of the child's progress and notified when the child returns home. The reports and evaluations are shared so they have a thorough understanding of the child.

Improvement Opportunities

A lot of the caseworkers are making decisions about visitation or placement changes without consulting the GAL. The GALs are very concerned that they're not being consulted. Workers don't get the GAL's perspective before making a major change. About half of the workers include the GALs in decision making and the other half leave them out.

There are a few caseworkers who consistently don't get reports to the AG on time. The workers don't realize the impact this has on the attorneys, who may have five to eight times as many cases as each worker has. If the attorneys don't have the court report, they can't prepare for court.

It's a challenge when there is turnover and new caseworkers are hired. It takes a while for new workers to learn what they need to know about the legal process. New workers are fearful of the attorneys. New workers need a supervisor or mentor who is available to help them.

DCFS puts lots of emphasis on placing children with kin, but there aren't enough kinship workers to support the large number of kinship placements.

Lack of availability of resources is always a huge factor in DCFS cases. Through no fault of DCFS, there are delays getting services. There is an abundance of substance abuse issues, and parents are on waiting lists for treatment. Parents have to wait 60-90 days for residential treatment or intensive outpatient treatment. In order to remain eligible for a slot in a drug treatment program, parents try to go to group meetings, but this isn't sufficient for their needs and they often relapse. They're losing the battle on substance abuse cases because parents can't get treatment. Substance abuse treatment is the primary missing resource.

The majority of the time the GAL gets notice after the fact that a Child and Family Team Meeting (CFTM) has been held. GALs have pre-set court days each week when the workers know they have to be in court, yet workers set meetings on those days. GALs need a week or two of advance notice of meetings.

GALs have over 200 clients each. There's not enough time in the day to do their job.

RESOURCE FAMILY CONSULTANTS, FOSTER PARENT AND UTAH FOSTER CARE FOUNDATION (UFCF)

Strengths

The Resource Family Consultants (RFCs) have a great supervisor. She stands up for them and foster parents.

The Regional Director is very respectful of foster parents.

RFCs are “old timers” who’ve been caseworkers and know the child welfare system well. They know where to direct foster parents for resources.

DCFS has a great partnership with Wasatch Mental Health. They have a good partnership with Office of Licensing and the Utah Foster Care Foundation as well.

RFCs are making it a #1 priority to keep kids in the same school when they have to change foster homes.

When a foster parent requests that a foster child be removed from the home, the RFCs try to keep the child in placement for one more day so they can have a crisis staffing and find a new placement.

Foster parents are very dedicated. They’ll take kids who rate a Level 5 or 6 on the CANS assessment even though they’re only licensed for Level 3.

DCFS tries to keep kids in a home environment whenever possible.

A lot of the reason cases go well is the RFC supporting and encouraging the foster parents.

There’s a great working relationship between UFCF (Utah Foster Care Foundation) and the Division. UFCF meets a couple of times a week with the RFCs. As needs come up, they talk about how UFCF can recruit for those needs. There’s no one at DCFS that UFCF can’t approach and collaborate with.

Steps have been taken to streamline the licensing process for foster parents. The relationship with Office of Licensing (OL) in the region is good. It takes about 90 days to get licensed. The families provide the paperwork directly to OL. The home study piece used to be a bottle neck. Now they know all the paperwork has to be in before OL will do the home study.

Improvement Opportunities

The foster parent payment system is archaic. RFCs do the payments to take that responsibility off the workers. It's too bad the payment system isn't on the computer. They need a modern payment system. Foster parents should get their pay on time.

The mileage reimbursement for foster parents is way too low. Foster pay also needs to be raised.

RFCs are spread thin and would like to be able to do more. They'd like to be in the foster homes more often.

Team meetings are not as good as they should be. Foster parents need to be made to feel comfortable at CFTMs. Sometimes they need someone there to support them. For example, they might be afraid of the bio parents. The RFCs would like to be invited to CFTMs by the workers instead of the foster parents. RFCs can pick up on things going on in the meeting that the worker might not notice. Some workers still need some meeting management skills and need to be more attentive to when the kids should be asked to leave the room. Sometimes the RFCs take the kids out of the meeting so the meeting can go on.

DCFS is so child-focused that the caregivers' needs get overlooked. Caseworkers expect foster parents to transport to distant visits, or whatever else they need them to do. Often workers have unrealistic expectations. Caseworkers have the "that's the foster parent's job" mindset, and they ask unrealistic things of foster parents. Foster parenting is hard and foster parents get burned out.

Rural areas are having a hard time recruiting foster parents.

SUBSTANCE ABUSE TREATMENT PROVIDERS

Strengths

House of Hope has a DCFS staff member come each week to staff clients. Lots of the clients are Drug Court clients. The treatment providers have a good rapport with DCFS and include them in any decision that needs to be made about the client. DCFS responds quickly if they call them. Things go particularly well when they're dealing with DCFS upper management. They always get a response.

The providers really like attending the team meetings so they can meet everyone who's working with the client.

The communication between providers and caseworkers is good.

They are rewriting contracts at the State Office to be stronger to address problems. This has been a long time in coming.

Improvement Opportunities

Substance abuse providers have to deal with lots of clients who have chronic pain or extreme psychiatric issues. When mental health issues override a client's substance abuse issues, providers don't know what to do with the clients. If clients don't have Medicaid, they can't go to WMH.

Women are losing parental rights because they can't get stable on medications.

The 12-month court time frame is frustrating. The average initial stay in a drug treatment program is 90 days just to stabilize a client so they can go to outpatient treatment.

At the beginning of a case when workers are trying to get someone into treatment, workers want the client placed immediately. Caseworkers are deciding where the client has to go to get treatment before a substance abuse provider has even done an assessment on the client.

The Drug Court team has had a lot of turnover, so they're not as educated as they need to be and cases are rough in the beginning.

Different caseworkers have different rules about what requirements clients must meet before their children can be reunified with them. Some clients get visits, but other clients with similar circumstances don't get visits. There doesn't seem to be any reason for the difference except that the worker or GAL on the case is different.

The biggest issue with outpatient treatment is males who work days and can't get to treatment during the day. They may have to wait four to five months for treatment. A woman who doesn't have kids but has a job may wait months, too.

The struggle the past seven to eight months has been workers who were new and weren't well trained. The providers had to run the team meetings for the new workers.

Workers aren't trained on what Utah County Substance Abuse does. There needs to be more effort to make sure workers have their wings under them before they start working cases. They need to be trained about the various substance abuse providers.

DCFS ADMINISTRATORS, SUPERVISORS and CASEWORKERS

Strengths

The new phones provided to workers have been so helpful the workers don't know how they did their jobs without them.

Strengthening Families is one of the best programs they have in Western Region. It's great.

The Regional Director is great. Administration has been willing to get involved in specific cases and work alongside workers and supervisors. It feels like they're all in this together.

The Drug Court team works well with the CPS team.

RFCs find books and trainings for foster parents and have meetings with the foster parent cluster groups. RFCs come to team meetings and support the caseworker. They're the mediator a lot of times between the foster parent and the worker or biological parent.

Over the past year there's been a lot of support for workers. Workers have been positive and the atmosphere has been positive. Everyone has liked knowing what the expectations are. They're working well together. Workers and supervisors support each other. There's been good morale. There aren't any turf battles, especially when new cases come in and have to be assigned.

There's been a lot of discussion on the Transition to Adult Living (TAL) team about permanency because TAL workers get stuck on Individualized Permanency as the primary permanency goal. They're revisiting family members and looking for new ways to get permanency for TAL kids.

There are a lot of problems with proctor placements, so a child placed in proctor care is likely to be moved. Someone needs to pay attention to how many complaints there are about each proctor provider.

The Director of Children's Services at Wasatch Mental Health (WMH) is an advocate of System of Care. They picked a couple of cases and coordinated efforts to keep these children at home. The children were at risk of coming into foster care. They had to go to court three times to get permission for one child to stay at home. They met at the school with the vice-principal, therapist, school, caseworker, bishop, and probation officer. Everybody has an assignment; it's not just DCFS making sure everything happens to keep the child at home.

There's been reasonably good coordination with Department of Workforce Services (DWS) on kinship cases. The way the region has set it up has been a plus. More kids are going with kin. It's scary to think what they would do with all the kids coming into care if they weren't placed with kin.

The region took on a whole new attitude about how they go into QCR reviews. They're hoping to continue this trend.

Improvement Opportunities

The new peer parenting program is three times as expensive as it used to be, but it's not three times better service. It wasn't broken, so why did it change? Now there's a new criteria to limit who can use it, so lots of parents who would have gotten it before won't get it now. Good peer parents come to court and team meetings, but the new contract doesn't allow them to come to court.

Workers have to use their own cars, and the mileage reimbursement isn't enough.

The courts are swamped. The judges are sensitive to the attorneys' schedules but not to the caseworkers' schedules. Several GALs are good about getting back to workers, but others don't respond or participate in cases at all outside of court.

There needs to be consistency between the judges and courts. How a case is handled is completely different depending on which judge handles it. For example, some children's judges never order them into Detention while other judges order children into Detention for nothing.

The CANS assessment can be manipulated and it's not accurate because it only looks at the last 30 days. You need to look at things over a longer period of time. There aren't enough trauma questions. They don't have an assessment tool that gets the family history and reveals the trauma, which is what really needs to be addressed to solve the long term issues. The State Office wants them to use CANS for lots of things, but they only use it for placement. If the suggested placement level isn't available, they place them in the next closest available placement level.

DCFS doesn't have any contracts for residential substance abuse. They have to go through JJS and use their contract. Workers have to go to a multi-agency staffing, have an order from a judge, and then wait for an opening.

There was an initiative started to have MSW interns placed in local schools to do preventative work. They went from one such intern to three this year. High schools are clamoring for these interns.

When kids are taken away, parents lose housing, Medicaid and food stamps. Then the system tells them they have to have those very things to get their kids back.

It takes too long to get parents into treatment. It takes two months just to get a psychological evaluation, and then two more months to get into treatment. By then the 12-month permanency time frame is almost half gone.

It's impossible to get answers from DWS. You can't get hold of a real person or fill out the paperwork correctly. If a form isn't perfect, they'll drop the client's Medicaid. You can't talk to the same person you talked to previously. Workers have to bring the parent in for a face to face meeting with DWS because they can't get the answers they need over the phone. Lots of times DWS doesn't know why Medicaid was cancelled, and they have to reinstate it. Teens get dropped off Medicaid all the time.

DCFS loses children at 21, but the children can't transfer to DSPD because it's so hard to get them onto DSPD. It took a year to get a child qualified. It was a long, slow process. It takes a long time just to get the DSPD worker assigned, and DCFS can't move forward until that happens.

If the caseworker isn't aggressive, the substance abuse provider will go along with what the client thinks they need rather than what the worker thinks they need. This is a big issue with assessments done by Utah County Substance Abuse.

WMH (Wasatch Mental Health) assessments are very general. Workers can't tell what the treatment recommendations are, and they're not helpful. A lot of WMH therapists won't even provide recommendations.

Special needs children often aren't adopted, even though they're in great homes, because they would lose services. Foster parents of special needs children aren't willing to proceed with guardianship or adoption because they can't afford to. Also, they don't want the liability if the child steals a car or something.

They need more resources to support drug cases so kids can stay at home while parents are being treated.

The number of contracts DCFS has was reduced. A larger percentage went to JJS. This is undermining the CANS assessment with workers. Workers ask why they should bother doing the CANS assessment if they know the placement it will recommend isn't available. For example, DCFS has more sex offenders that don't rise to the level of JJS custody, but DCFS doesn't have placements for them.

III. Child and Family Status, System Performance, Analysis, and Trends

The QCR findings are presented in graphic form to help quantify the observations of the qualitative review. Graphs show a comparison of scores for past reviews with the current review. The charts of the two broad domains of Child and Family Status and System Performance show the percentage of cases in which the key indicators were judged to be “acceptable.” A six-point rating scale is used to determine whether or not an indicator is judged to be acceptable. Reviewers scored each of the cases reviewed using this rating scale. The range of ratings is as follows:

- 1: Completely Unacceptable
- 2: Substantially Unacceptable
- 3: Partially Unacceptable
- 4: Minimally Acceptable
- 5: Substantially Acceptable
- 6: Optimal Status/Performance

Child and Family Status and System Performance are evaluated using 15 key indicators. Graphs presenting the overall scores for each domain are presented below. They are followed by graphs showing the distribution of scores for each indicator within each of the two domains.

Child and Family Status Indicators

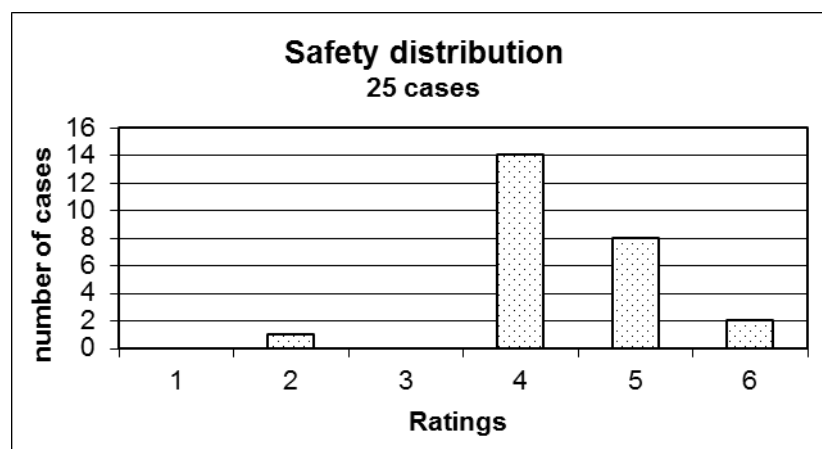
Overall Status

Western Child Status										
	# of	# of	Standard: 70% on all indicators	FY10	FY11	FY12	FY13	FY14	Trends	
	cases	cases	except Safety which is 85%					Current		
	(+)	(-)	Standard: Criteria 85% on overall score					Scores		
Safety	24	1	<div><div></div></div> 96%	83%	100%	92%	92%	96%	Improved and above standard	
Child Safe from Others	25	0	<div><div></div></div> 100%			96%	100%	100%	Status Quo and above standard	
Child Risk to Self	24	1	<div><div></div></div> 96%			96%	92%	96%	Improved and above standard	
Stability	19	6	<div><div></div></div> 76%	71%	75%	83%	71%	76%	Improved and above standard	
Prospect for Permanence	17	8	<div><div></div></div> 68%	71%	63%	67%	46%	68%	Improved but below standard	
Health/Physical Well-being	25	0	<div><div></div></div> 100%	100%	100%	100%	100%	100%	Status Quo and above standard	
Emot./Behavioral Well-being	22	3	<div><div></div></div> 88%	92%	96%	92%	92%	88%	Decreased but above standard	
Learning	22	3	<div><div></div></div> 88%	92%	92%	88%	88%	88%	Improved and above standard	
Family Connections	10	3	<div><div></div></div> 77%			94%	94%	77%	Decreased but above standard	
Satisfaction	21	4	<div><div></div></div> 84%	88%	88%	96%	92%	84%	Decreased but above standard	
Overall Score	24	1	<div><div></div></div> 96%	83%	100%	92%	88%	96%	Improved and above standard	
			0% 20% 40% 60% 80% 100%							

Safety

Summative Questions: Is the child safe from threats of harm in his/her daily living, learning, working and recreational environments? Are others in the child's daily environments safe from the child? Does the child avoid self-endangerment and refrain from using behaviors that may put self and others at risk of harm?

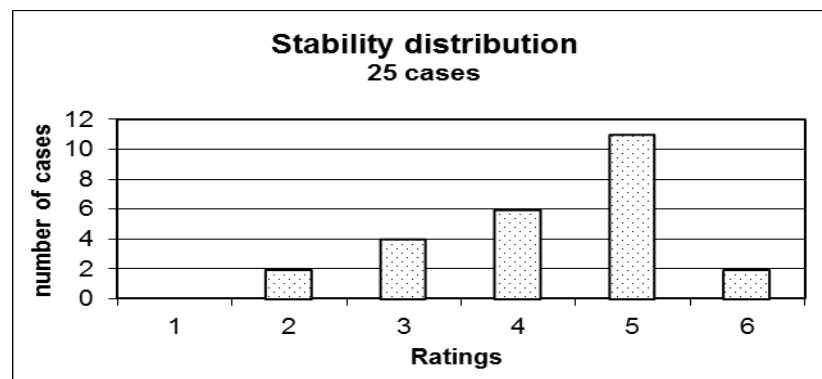
Findings: 96% of cases reviewed were in the acceptable range (4-6). This is four points higher than last year's score. This indicator measures both the Child's Safety from Others and the Child's Risk to Self or Others. Out of the 25 cases reviewed, only one had an unacceptable score on Safety, and that was on Child's Risk to Self or Others. In that case a teenager was a risk to herself because she was expressing suicidal thoughts and trying to harm herself.



Stability

Summative Questions: Has the child's placement setting been consistent and stable? Are the child's daily living and learning arrangements stable and free from risk of disruption? If not, are appropriate services being provided to achieve stability and reduce the probability of disruption?

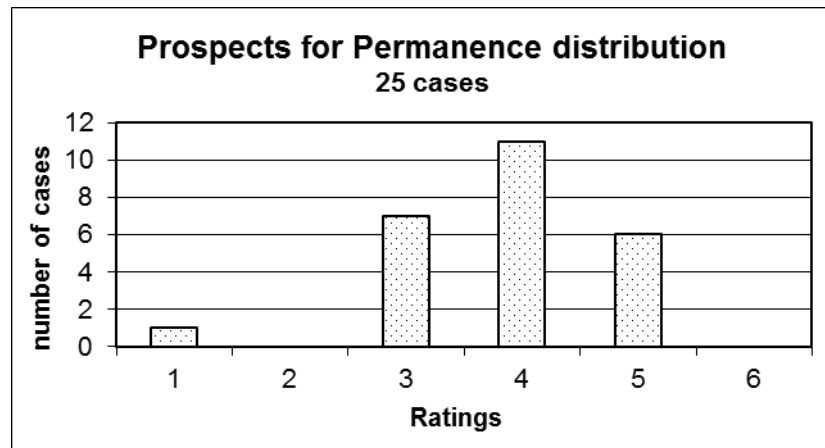
Findings: 76% of cases reviewed were in the acceptable range (4-6). This is an increase from last year's score of 71%.



Prospects for Permanence

Summative Questions: Is the child living with caregivers that the child, caregivers, and other stakeholders believe will endure until the child becomes independent? If not, is a permanency plan presently being implemented on a timely basis that will ensure that the child will live in enduring relationships that provide a sense of family, stability, and belonging?

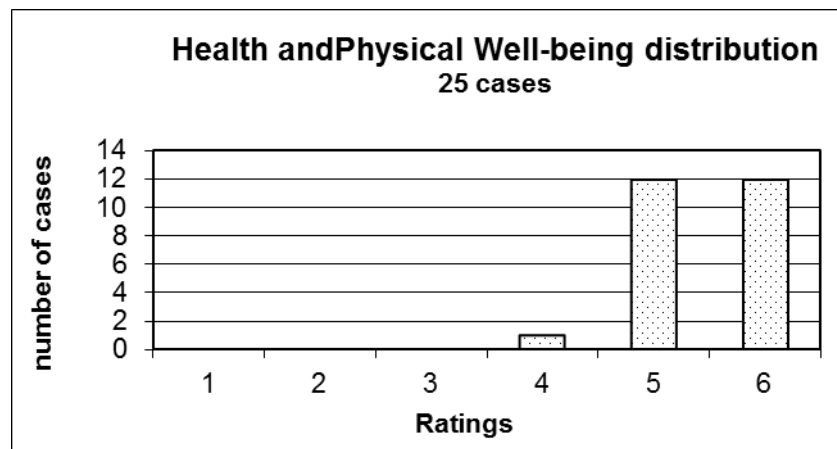
Findings: 68% of cases reviewed were within the acceptable range (4-6). This is a substantial increase from last year's score of 46%.



Health/Physical Well-Being

Summative Questions: Is the child in good health? Are the child's basic physical needs being met? Does the child have health care services, as needed?

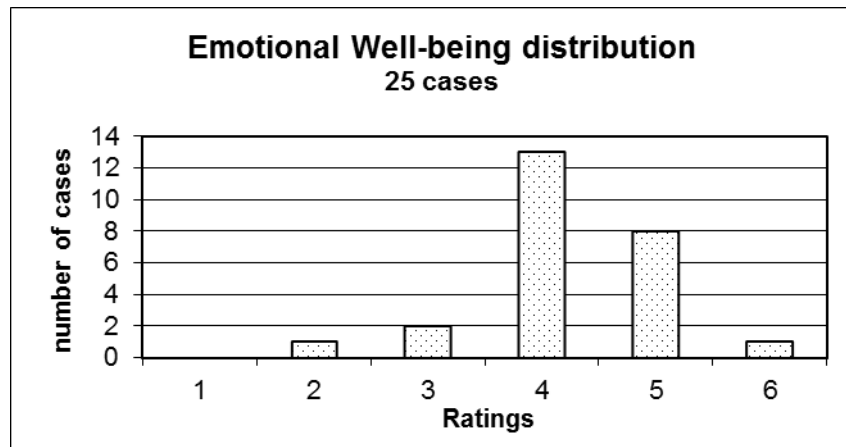
Findings: 100% of cases reviewed were in the acceptable range (4-6). This score has been 100% for several consecutive years.



Emotional/Behavioral Well-Being

Summative Questions: Is the child doing well emotionally and behaviorally? If not, is the child making reasonable progress toward stable and adequate functioning, emotionally and behaviorally, at home and school?

Findings: 88% of cases reviewed were within the acceptable range (4-6). This is slightly lower than last year's score of 92%.

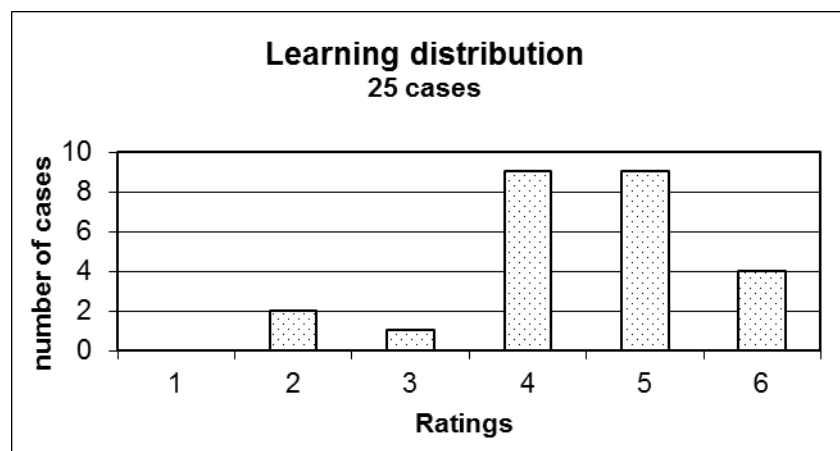


Learning Progress

Summative Question: (For children age five and older.) Is the child learning, progressing and gaining essential functional capabilities at a rate commensurate with his/her age and ability?

Note: There is a supplementary scale used with children under the age of five that puts greater emphasis on developmental progress. Scores from the two scales are combined for this report.

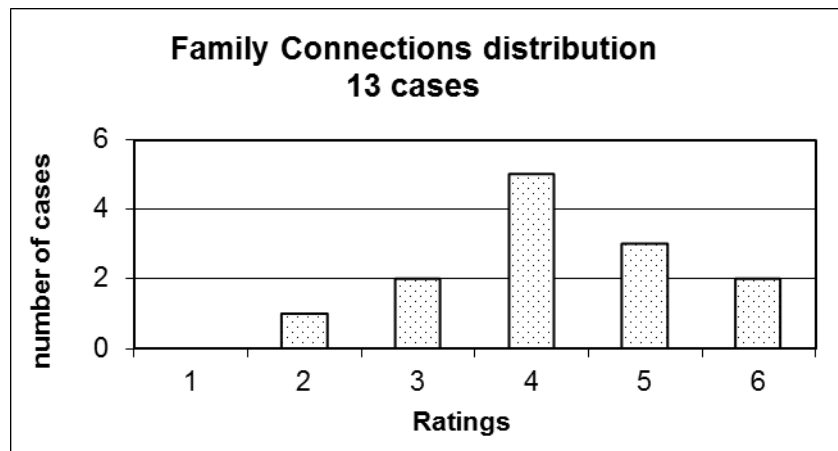
Findings: 88% of cases reviewed were within the acceptable range (4-6). This is identical to last year's score.



Family Connections

Summative Question: While the child and family are living apart, are family relationships and connections being maintained through appropriate visits and other connecting strategies, unless compelling reasons exist for keeping them apart?

Findings: This indicator measures whether or not the relationship between the child and the mother, father, siblings, and other important family members is being maintained while the child is in foster care. Seventy-seven percent of cases scored acceptable on Overall Family Connections. This is a significant decline from last year's score of 94%. The scores ranged from 100% for Fathers and Others to 67% for siblings.

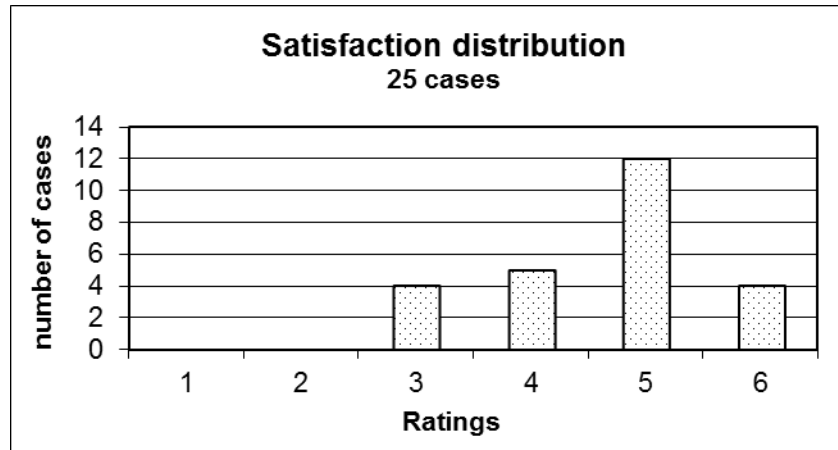


Western-Family Connections			
	# of cases (+)	# of cases (-)	FY14 Current Scores
Overall Connections	10	3	77%
Siblings	4	2	67%
Mother	8	1	89%
Father	9	0	100%
Other	2	0	100%

Satisfaction

Summative Question: Are the child, parent/guardian, and substitute caregiver satisfied with the supports and services they are receiving?

Findings: 84% of cases reviewed were within the acceptable range (4-6) on the overall Satisfaction score. This is a decline from last year's score of 92%. Reviewers rated the satisfaction of children, mothers, fathers, and caregivers. Scores for all individual parties ranged from 100% for caregivers to 67% for fathers.

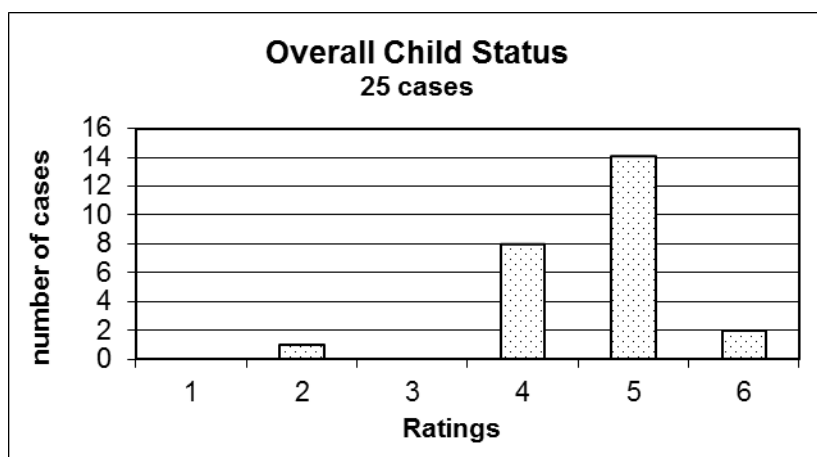


Satisfaction			
	# of cases (+)	# of cases (-)	FY14 Current Scores
Satisfaction	21	4	84%
Child	11	1	92%
Mother	13	6	68%
Father	8	4	67%
Caregiver	16	0	100%

Overall Child and Family Status


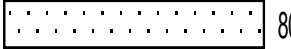






Summative Questions: Based on the Qualitative Case Review scores determined for the Child and Family Status indicators, how well are this child and family presently doing? A special scoring procedure is used to determine Overall Child and Family Status using the 6-point rating scale. In addition to scoring a 4 with this procedure, four of the first seven status indicators (minus Satisfaction) must score acceptable in order for the Overall Score to be acceptable. A unique condition affects the rating of Overall Child and Family status in every case: The Safety indicator always acts as a “trump” so that the Overall Child and Family status rating cannot be acceptable unless the Safety indicator is also acceptable.

Findings: 96% of cases reviewed were within the acceptable range (4-6). The overall Child and Family Status score increased from last year’s score of 88% and remained well above the 85% standard.



System Performance Indicators

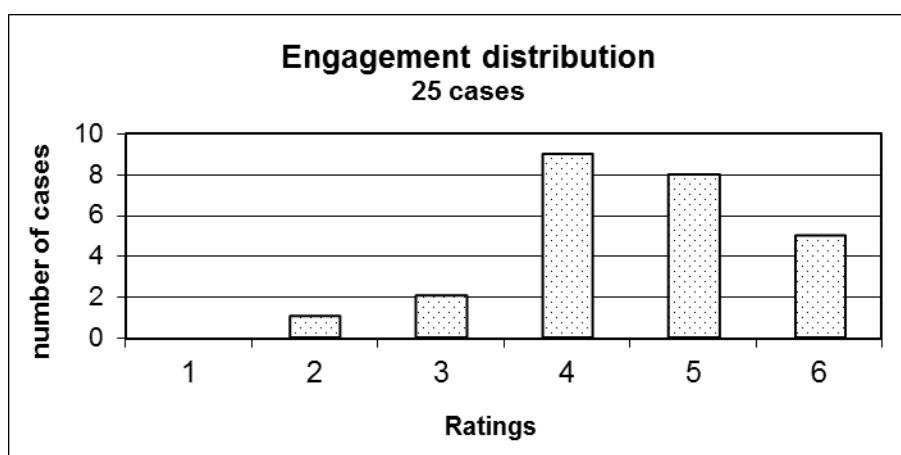
Overall System

Western System Performance										
	# of	# of		FY10	FY11	FY12	FY13	FY14	Trends	
	cases	cases	Standard: 70% on all indicators					Current		
	(+)	(-)	Standard: 85% on overall score					Scores		
Engagement	22	3	 88%	88%	75%	88%	79%	88%	Improved and above standard	
Teaming	20	5	 80%	79%	67%	67%	29%	80%	Improved and above standard	
Assessment	19	6	 76%	75%	75%	71%	71%	76%	Improved and above standard	
Long-term View	15	10	 60%	71%	58%	54%	42%	60%	Improved but below standard	
Child & Family Plan	21	4	 84%	71%	38%	58%	46%	84%	Improved and above standard	
Intervention Adequacy	22	3	 88%	88%	88%	79%	75%	88%	Improved and above standard	
Tracking & Adapting	22	3	 88%	92%	75%	92%	75%	88%	Improved and above standard	
Overall Score	20	5	 80%	92%	83%	79%	67%	80%	Improved but below standard	
			0% 20% 40% 60% 80% 100%							

Child and Family Engagement

Summative Questions: Has the agency made concerted efforts to actively involve parents and children in the service process and in making decisions about the child and family? To what extent has the agency used rapport building strategies, including special accommodations, to engage the family?

Findings: 88% of cases reviewed were within the acceptable range (4-6). This is an increase from last year's score of 79% and well above standard. Separate scores were given for Child, Mother, Father and Other. An overall score was then selected by the reviewer. Scores for the various groups ranged from a high of 100% for Others to 63% for Fathers. This is a 20 point improvement from the Fathers score last year (43%).

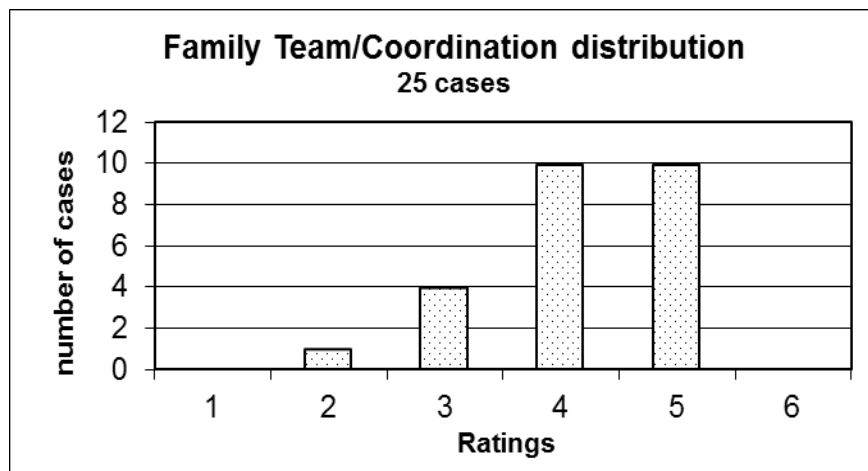


Western-Engagement			
	# of cases (+)	# of cases (-)	FY14 Current Scores
Engagement	22	3	88%
Child	18	1	95%
Mother	14	4	78%
Father	10	6	63%
Other	6	0	100%

Child and Family Teaming

Summative Questions: Do the child, family, and service providers function as a team? Do the actions of the team reflect a pattern of effective teamwork and collaboration that benefits the child and family? Is there effective coordination in the provision of services across all providers?

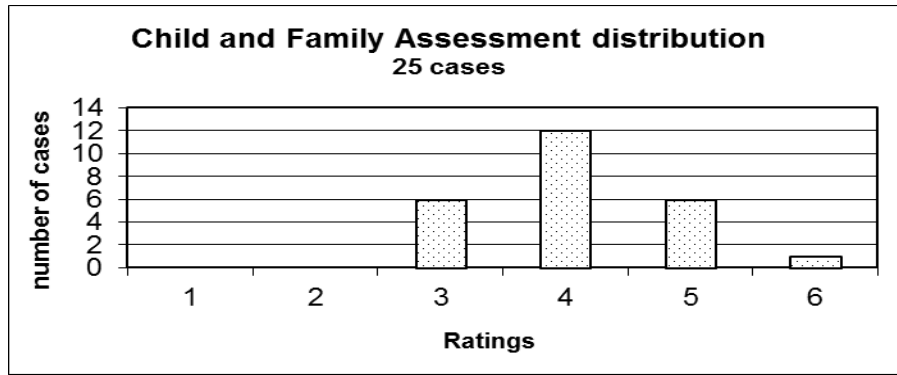
Findings: 80% of cases reviewed were within the acceptable range (4-6). This is a phenomenal improvement from last year's score of 29% and well above standard.



Child and Family Assessment

Summative Questions: Are the current, obvious and substantial strengths and needs of the child and family identified through existing assessments, both formal and informal, so that all interveners collectively have a “big picture” understanding of the child and family? Do the assessments help the team draw conclusions on how to provide effective services to meet the child’s needs for enduring permanency, safety, and well-being? Are the critical underlying issues identified that must be resolved for the child to live safely with his/her family independent of agency supervision or to obtain an independent and enduring home?

Findings: 76% of cases reviewed were in the acceptable range (4-6). This is five points higher than last year's score and above the 70% standard. Individual scores were given for this indicator. The highest score was the Caregiver score at 100%. The Child's score was somewhat lower at 88%. Mothers and Fathers scored lower at 72% and 71% respectively. This was substantially higher than last year's scores of 58% for Mothers and 38% for Fathers.

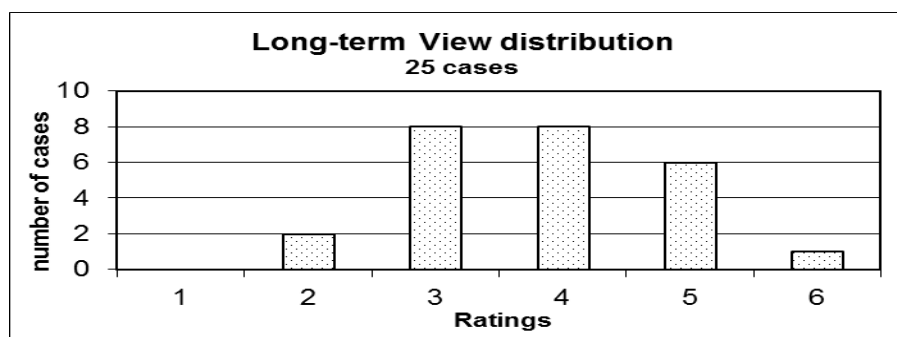


Western-Assessment			
	# of cases (+)	# of cases (-)	FY14 Current Scores
Assessment	19	6	76%
Child	22	3	88%
Mother	13	5	72%
Father	10	4	71%
Caregiver	14	0	100%

Long-Term View

Summative Questions: Is there a path that will lead the family and/or child toward achieving enduring safety and permanency without DCFS interventions? Is it realistic and achievable? Does the team, particularly the child/family, understand the path and destination? Does the path provide steps and address the next major transition(s) toward achieving enduring safety and permanence independent of DCFS interventions?

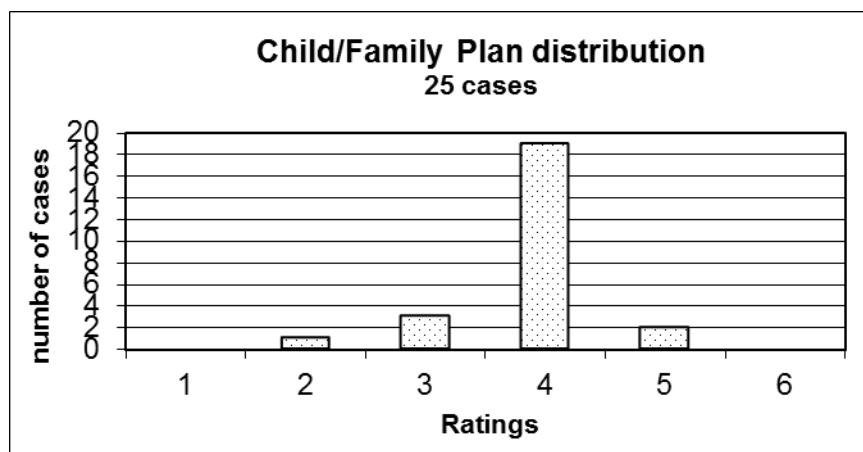
Findings: 60% of cases reviewed were within the acceptable range (4-6). This is a substantial increase from last year's score of 42%.



Child and Family Plan

Summative Questions: Is the Child and Family Plan individualized and relevant to needs and goals? Are supports, services and interventions assembled into a holistic and coherent service process that provides a mix of elements uniquely matched to the child/family's situation and preferences? Does the combination of supports and services fit the child and family's situation so as to maximize potential results and minimize conflicting strategies and inconveniences?

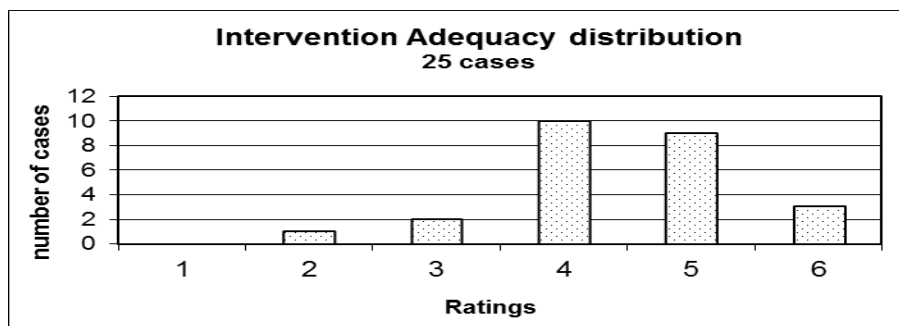
Findings: 84% of cases reviewed were within the acceptable range (4-6). This is an amazing increase from last year's score of 46%.



Intervention Adequacy

Summative Questions: To what degree are the planned interventions, services, and supports being provided to the child and family of sufficient power (precision, intensity, duration, fidelity, and consistency) and beneficial effect to produce results that would enable the child and family to live safely and independent from DCFS?

Findings: 88% of cases reviewed were within the acceptable range (4-6). This is an increase from last year's score of 75% and well above standard. This indicator was scored separately for Child, Mother, Father, and Caregiver. The scores ranged from 100% for Caregivers to 78% for Fathers.

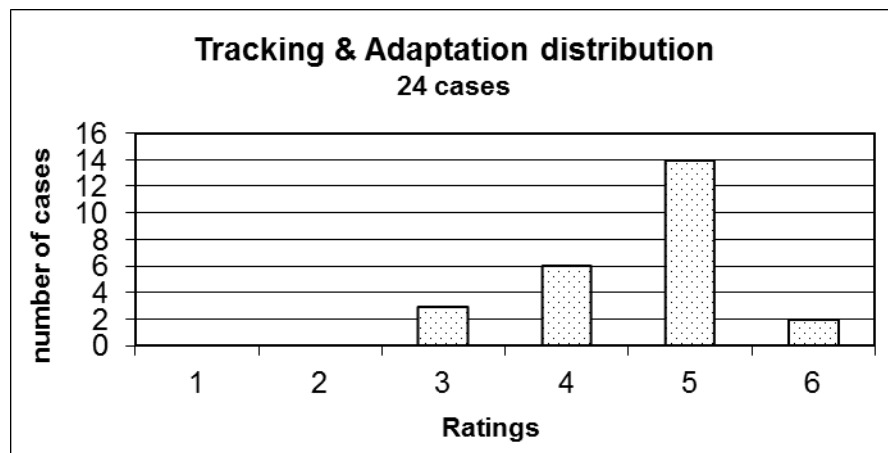


Western-Intervention Adequacy			
	# of cases (+)	# of cases (-)	FY14 Current Scores
Intervention Adequacy	22	3	88%
Child	21	4	84%
Mother	12	1	92%
Father	7	2	78%
Caregiver	15	0	100%

Tracking and Adaptation

Summative Questions: Are the child and family status, service process, and progress routinely monitored and evaluated by the team? Are services modified to respond to the changing needs of the child and family and to apply knowledge gained about service efforts and results to create a self-correcting service process?

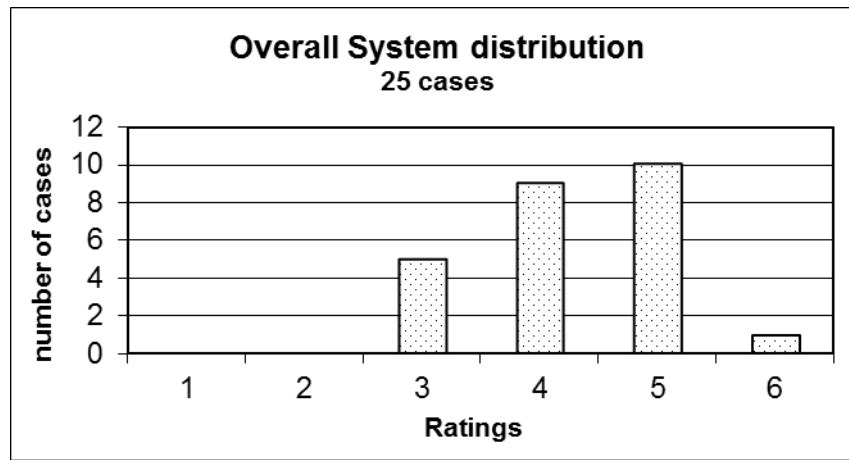
Findings: 88% of cases reviewed were in the acceptable range (4-6). This is a nice increase from last year's score of 75%.



Overall System Performance

Summative Questions: Based on the Qualitative Case Review scores determined for System Performance indicators, how well is the service system functioning for this child now? A special scoring procedure is used to determine Overall System Performance using the 6-point rating scale. In addition to scoring a 4 with this procedure, four of the seven system performance indicators must score acceptable in order for the overall score to be acceptable.

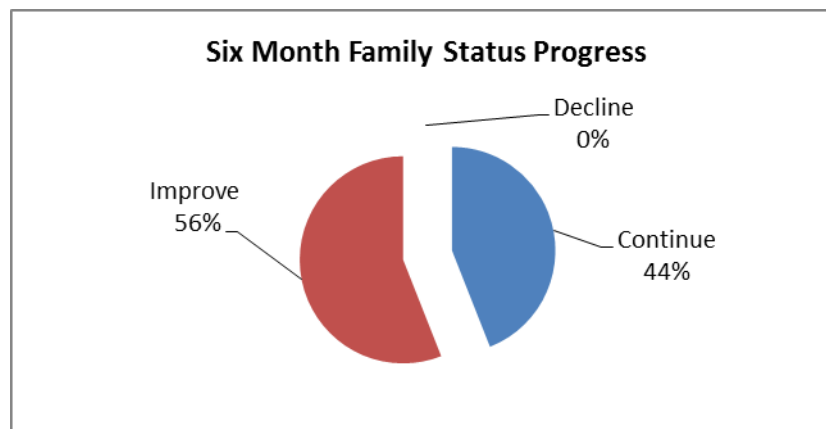
Findings: 80% of cases reviewed were within the acceptable range (4-6). This is a significant increase from last year's score of 67% and just below the 85% standard.



Status Forecast

One additional measure of case status is the reviewers' prognosis of the child and family's likely status in the next six months, given the current level of system performance. Reviewers respond to this question: "Based on current DCFS involvement for this child, family, and caregiver, is the child's overall status likely to improve, stay about the same, or decline over the next six months?"

Of the 25 cases reviewed, 56% (14 cases) anticipated an improvement in family status over the next six months. In the other 44% of the cases (11 cases), family status was likely to stay about the same. There were no cases where the family's status was expected to decline over the next six months.



Outcome Matrix

The display below presents a matrix analysis of the service testing results during the current QCR. Each of the cells in the matrix shows the percent of children and families experiencing one of four possible outcomes:

- Outcome 1: child and family status acceptable, system performance acceptable
- Outcome 2: child and family status unacceptable, system performance acceptable
- Outcome 3: child and family status acceptable, system performance unacceptable
- Outcome 4: child and family status unacceptable, system performance unacceptable

The desired result is to have as many children and families in Outcome 1 as possible and as few in Outcome 4 as possible. It is fortunate that some children and families do well in spite of unacceptable system performance (Outcome 3). Experience suggests that these are most often either unusually resilient or resourceful children and families, or children and families who have some “champion” or advocate who protects them from the shortcomings of the system. Unfortunately, there may also be some children and families who, in spite of good system performance, do not do well (these children and families would fall in Outcome 2).

The outcome matrix for children and families reviewed during the Western Region review indicates that 80% of the cases had acceptable ratings on both Child Status and System Performance. There was one case that rated unacceptable on both Child Status and System Performance.

	Favorable Status of Child Outcome 1	Unfavorable Status of Child Outcome 2	
Acceptable System Performance	Good status for the child, agency services presently acceptable. n= 20 80%	Poor status for the child, agency services minimally acceptable but limited in reach or efficacy. n= 0 0%	80%
Unacceptable System Performance	Outcome 3 Good status for the child, agency Mixed or presently unacceptable. n= 4 16%	Outcome 4 Poor status for the child, agency presently unacceptable. n= 1 4%	20%
	96%	4%	100%

V. Analysis of the Data

RESULTS BY CASE TYPE

The following tables compare how the different Case Types performed on some key child status and core system performance indicators. There were no family preservation (PFP/PFR) or voluntary cases (PSC) in the sample. There were 18 Foster Care cases and seven In-home cases. Foster Care and In-home cases both did very well on Overall Child Status, and In-home cases scored above standard on Overall System Performance. Foster Care cases scored below standard on Overall System Performance (78%).

Case Type		# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
Foster Care	SCF	18	94%	61%	94%	83%	83%	78%	56%	78%	89%	83%	78%
In-Home	PSS	7	100%	86%	100%	100%	71%	71%	71%	100%	86%	100%	86%

Collection of demographic information regarding cases included in the case sample includes the question, “Did the child come into services due to delinquency instead of abuse and neglect?” Six of the 25 cases (24%) in the sample are reported to have entered services due to delinquency rather than abuse or neglect. The following table shows that Delinquency cases scored better than Non-delinquency cases.

Case Type	# in Sample	Stability	Prospects for Permanence	Overall Child Status	Overall System Performance
Delinquency	6	100%	83%	100%	83%
Non-Delinquency	19	68%	63%	95%	79%

RESULTS BY PERMANENCY GOAL

The following table compares how the different Permanency Goals performed on some key child status and core system performance indicators. There were four different Permanency Goal types represented in the case sample. All case types scored similarly on Overall System Performance. Three of the four cases with the goal of Individualized Permanency scored unacceptable on Long-term View. There were two Reunification cases that had unacceptable Overall System Performance. There was one case with each of the other goals that had unacceptable Overall System Performance.

Permanency Goal	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
Adoption	4	75%	75%	75%	100%	100%	75%	75%	50%	75%	75%	75%
Guardianship (Non-Rel)	0	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Guardianship (Rel)	0	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Individualized Perm.	4	100%	50%	100%	75%	75%	100%	25%	100%	75%	75%	75%
Remain Home	5	100%	80%	100%	100%	80%	80%	60%	100%	80%	100%	80%
Reunification	12	100%	67%	100%	83%	75%	67%	67%	83%	100%	92%	83%

RESULTS BY CASEWORKER DEMOGRAPHICS

Caseload

The following table compares how caseload affected some key child status and core system performance indicators. Caseloads in the sample were divided into two categories: caseloads of 16 cases or less and caseloads of 17 cases or more. Last year almost half of the caseworkers (46%) had caseloads of 17 cases or more (11 of 24 workers). This year only one of the 25 workers (4%) had a high caseload.

Caseload Size	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
16 cases or less	24	96%	67%	96%	88%	79%	75%	58%	83%	88%	88%	79%
17 cases or more	1	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Worker Experience

The following table compares how Length of Employment as a caseworker impacts performance. Only three workers had less than a year of experience. The least experienced workers had the lowest percentage score on Overall System Performance; however, there were only three such workers, so there was only one case that was unacceptable. Scores for workers with various years of experience ranged from 71% to 88%, but the scores didn't correlate with the years of experience.

Length of Employment in Current Position	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
Less than 12 months	3	100%	67%	100%	67%	33%	67%	67%	67%	100%	100%	67%
12 to 24 months	7	100%	71%	100%	100%	86%	71%	57%	100%	86%	86%	86%
24 to 36 months	7	86%	43%	86%	86%	86%	71%	43%	86%	71%	71%	71%
36 to 48 months	0	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
48 to 60 months	0	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
60 to 72 months	0	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
More than 72 months	8	100%	88%	100%	88%	88%	88%	75%	75%	100%	100%	88%

RESULTS BY OFFICE

The following table compares how offices within the region performed on some key child status and system performance indicators. Cases from seven offices in the Western Region were selected as part of the sample. Of the offices with a small number of cases, Heber and Wasatch Mental Health both scored 100% on Overall System Performance. None of the offices that had five or more cases pulled achieved the standard on Overall System Performance. Six of the seven offices achieved the standard on Overall Child Status.

Office	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
American Fork	3	100%	67%	100%	100%	100%	100%	67%	100%	100%	100%	100%
Delta	0	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Fillmore	1	100%	0%	100%	0%	0%	0%	0%	100%	100%	100%	0%
Heber	1	100%	100%	100%	100%	100%	100%	100%	100%	100%	0%	100%
Nephi	0	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Orem	6	100%	67%	100%	83%	83%	83%	33%	100%	83%	100%	83%
Provo	8	100%	75%	100%	88%	63%	88%	75%	75%	88%	88%	75%
Spanish Fork	5	80%	60%	80%	100%	100%	40%	60%	80%	80%	80%	80%
Wasatch Mental Health	1	100%	100%	100%	100%	100%	100%	100%	0%	100%	100%	100%

SYSTEM INDICATORS

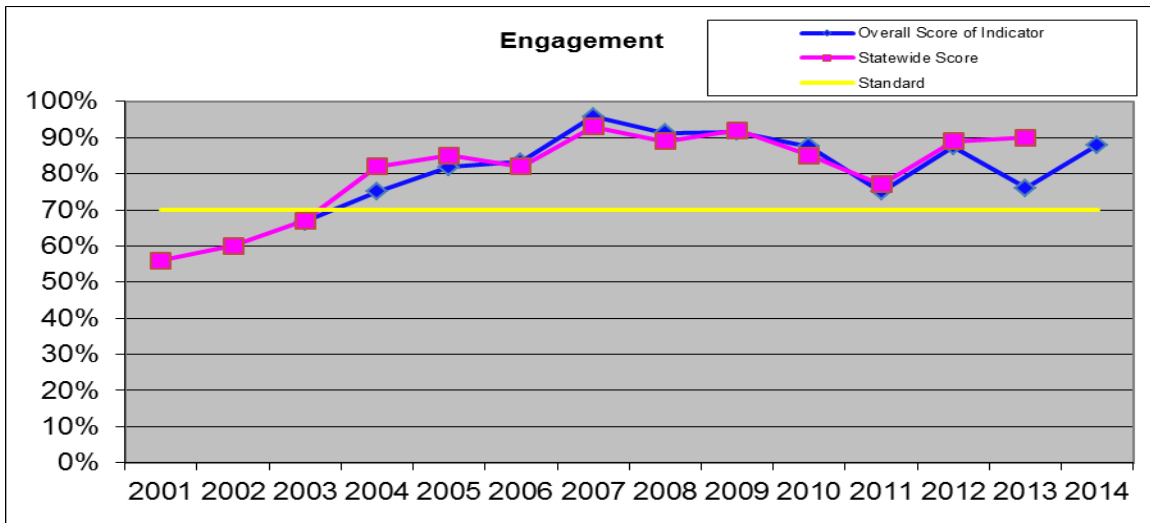
Below is data for all system indicators over the last 14 years showing how the ratings of 1 (completely unacceptable), 2 (substantially unacceptable), 3 (partially unacceptable), 4 (minimally acceptable), 5 (substantially acceptable) and 6 (optimal) are trending within each indicator. The table for each indicator in the section below shows an average and percentage score for that indicator. The line graph represents the percentage of the indicator that scored within the acceptable range. The ideal trend would be to see an increase in the average score of the indicator along with an increase in the percentage score.

Western region's score on Overall System Performance had declined from 92% in FY2010 to 67% in FY2013. This year the score improved to 80%, which is just five points below standard.

Child and Family Engagement

Both the average and the percentage scores on Engagement improved this year.

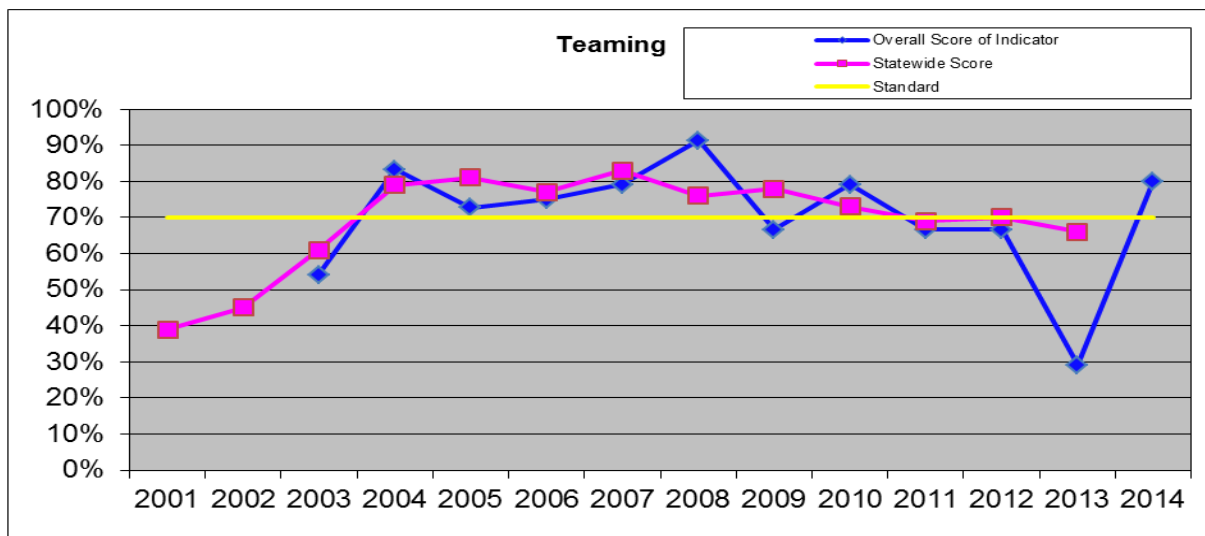
Engagement														
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Average Score of Indicator			3.75	4.17	4.36	4.42	4.46	4.43	4.58	4.58	4.08	4.57	4.47	4.70
Overall Score of Indicator			67%	75%	82%	83%	96%	91%	92%	88%	75%	88%	76%	88%
Statewide Score	56%	60%	67%	82%	85%	82%	93%	89%	92%	85%	77%	89%	90%	



Child and Family Team and Coordination

The Teaming score fell from 67% to 29% last year. That had a significant impact on the average score. The Teaming score made a phenomenal recovery this year to 80%, which led to a substantial increase in the average score.

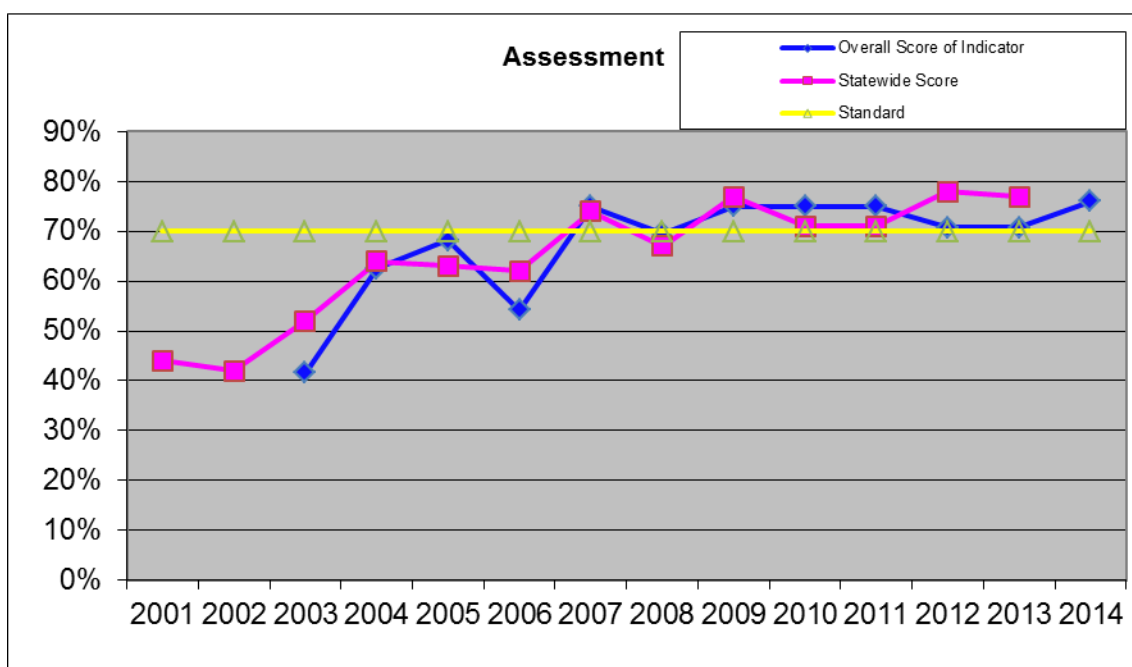
Teaming														
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Average Score of Indicator			3.67	4.08	4.18	4.17	4.08	4.39	4.08	4.33	4.00	4.00	3.29	4.16
Overall Score of Indicator			54%	83%	73%	75%	79%	91%	67%	79%	67%	67%	29%	80%
Statewide Score	39%	45%	61%	79%	81%	77%	83%	76%	78%	73%	69%	70%	66%	



Child and Family Assessment

The score on Assessment has been consistent, ranging from 70-75% over the past several years. This year the Assessment score was 76%. Both the average and the percentage scores rose this year.

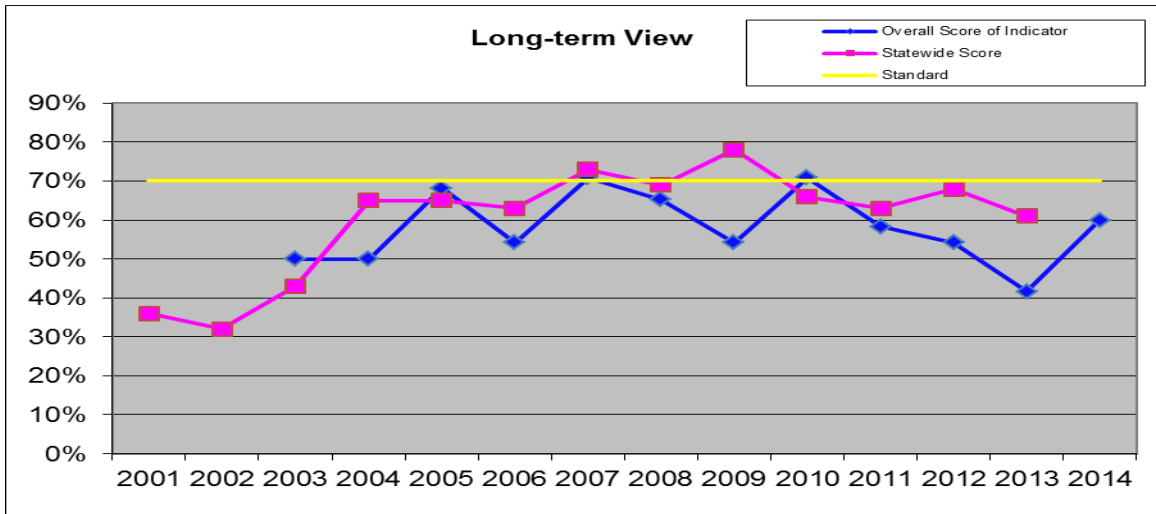
Assessment														
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Average Score of Indicator			3.33	3.79	3.82	3.83	3.96	3.87	3.92	4.00	4.04	3.83	3.92	4.08
Overall Score of Indicator			42%	63%	68%	54%	75%	70%	75%	75%	75%	71%	71%	76%
Statewide Score	44%	42%	52%	64%	63%	62%	74%	67%	77%	71%	71%	78%	77%	



Long-Term View

Long-term View had declined for three consecutive years and the region score was lower than the state score in those years. Long-term View rebounded to 60% this year.

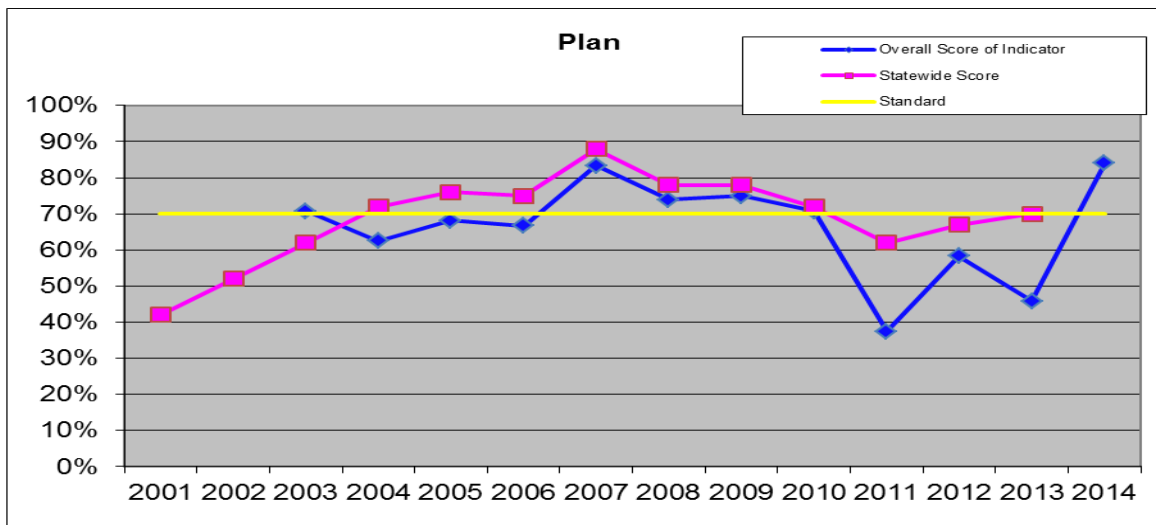
Long-Term View														
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Average Score of Indicator			3.38	3.58	3.91	3.71	3.92	3.91	3.54	3.88	3.63	3.67	3.54	3.84
Overall Score of Indicator			50%	50%	68%	54%	71%	65%	54%	71%	58%	54%	42%	60%
Statewide Score	36%	32%	43%	65%	65%	63%	73%	69%	78%	66%	63%	68%	61%	



Child and Family Plan

The percentage score for Child and Family Plan made an amazing comeback this year, rising from 46% to 84%. This led to a nice improvement in the average score.

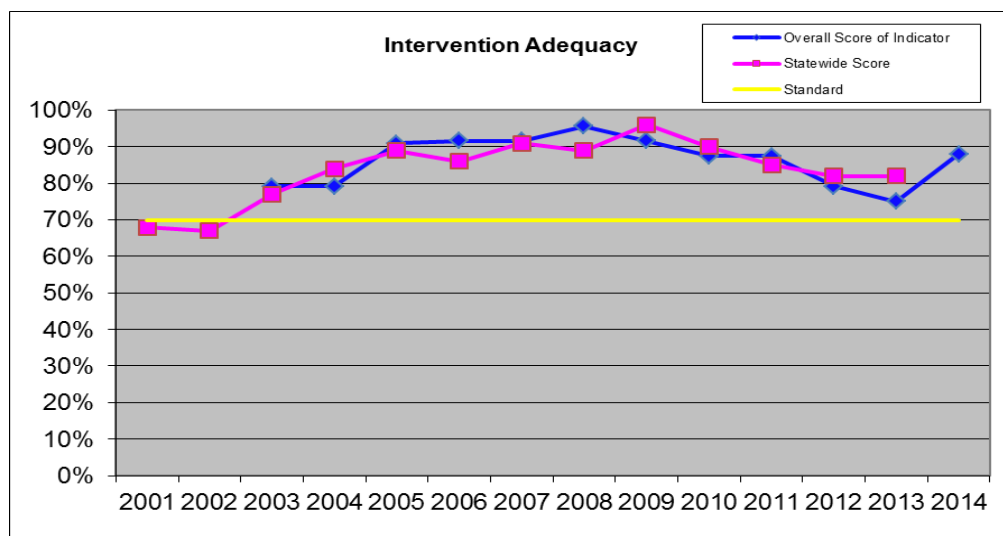
Child and Family Plan														
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Average Score of Indicator			3.83	3.83	4.09	3.96	4.13	4.00	3.96	3.83	3.33	3.75	3.50	3.88
Overall Score of Indicator			71%	63%	68%	67%	83%	74%	75%	71%	38%	58%	46%	84%
Statewide Score	42%	52%	62%	72%	76%	75%	88%	78%	78%	72%	62%	67%	70%	



Intervention Adequacy

Both the percentage and the average score for Intervention Adequacy improved this year by significant amounts.

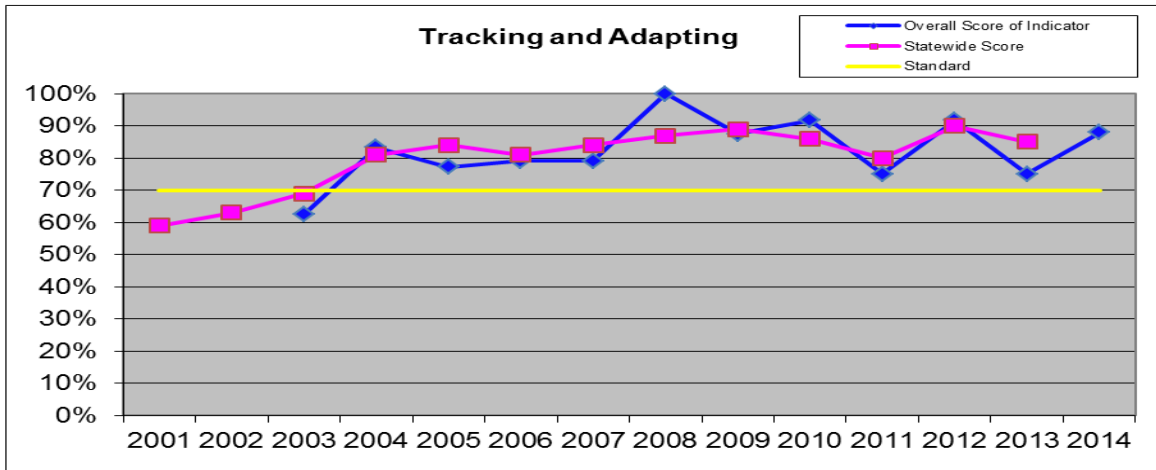
Intervention Adequacy														
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Average Score of Indicator			4.13	4.17	4.50	4.25	4.42	4.39	4.33	4.46	4.38	4.17	3.96	4.44
Overall Score of Indicator			79%	79%	91%	92%	92%	96%	92%	88%	88%	79%	75%	88%
Statewide Score	68%	67%	77%	84%	89%	86%	91%	89%	96%	90%	85%	82%	82%	



Tracking and Adaptation

Both the percentage and the average scores for Tracking and Adapting improved this year. The region has scored above standard on this indicator every year since FY2004.

Tracking and Adaptation														
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Average Score of Indicator			3.96	4.46	4.36	4.42	4.46	4.74	4.42	4.50	4.17	4.38	4.00	4.60
Overall Score of Indicator			63%	83%	77%	79%	79%	100%	88%	92%	75%	92%	75%	88%
Statewide Score	59%	63%	69%	81%	84%	81%	84%	87%	89%	86%	80%	90%	85%	



V. Summary and Improvement Opportunities

Summary

During the FY2014 Western Region Qualitative Case Review (QCR), numerous strengths were identified about child welfare practice in the Western Region. It is clear that there is significant commitment and hard work devoted to ensuring the safety and well-being of the children and families. During the QCR review, a few opportunities for practice improvement were also identified that could improve and enhance the services being provided.

The Region exceeded the 85% standard for Overall Child Status with a score of 96%. This is the fourth consecutive year that the Overall Child Status score has exceeded the standard. All other Child Status indicators also exceeded the standard except for Prospects for Permanency at 68%. Although the Prospects for Permanency score is below standard, it improved 22 points from last year's score of 46%. Most of the Child Status indicators scored similarly to how they scored last year, but there were significant declines in Family Connections (94% to 77%) and Satisfaction (92% to 84%).

After years of above standard Overall System Performance, Western Region scored below standard in FY2011 at 83%, declined in FY2012 to 79%, and then declined again last year to 67%. That trend was reversed this year when Overall System Performance scored 80%. This is slightly below standard, but it's a significant improvement. Every System Performance indicator except Long-term View exceeded the 70% standard.

Recommendations

The only two indicators that fell below standard this year were Long-term View at 60% and Prospects for Permanency at 68%. These two indicators are strongly correlated and improvement on one generally leads to improvement on the other. There were 10 cases that had unacceptable scores on LTV. Eight of those cases also had unacceptable scores on Prospects for Permanency. Many of the cases would have scored acceptable if there had been better concurrent planning. For example, four of the cases had target children age 10 and under, yet three of these children were living in placements that weren't committed to providing permanency. In the fourth case there was a potential concurrent plan, but it needed more clarity and solidity. Three of the four cases in the sample that had the goal of Individualized Permanency scored unacceptable on Long-term View. Given the behaviors, challenges, and developmental delays of some of the children, it will be difficult to achieve permanency for them. However, in other cases better concurrent planning and more attention to solidifying both primary and concurrent permanency plans could have resulted in improved scores.